

03630.000317

PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

DON F. PURPURA

Application No.: 09/853,608

Filed: May 14, 2001

For: INTERFACE DEVICE WITH  
NETWORK ISOLATION

Examiner: J. Alexander

Group Art Unit: 2666

February 22, 2005

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Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450AMENDMENT

Sir:

In response to the Office Action dated November 19, 2004, please amend  
the above-identified application, as follows:

I hereby certify that this correspondence is being facsimile transmitted to  
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February 22, 2005

(Date of Deposit)

Michael K. O'Neill, Reg. No. 32,622

(Name of Attorney for Applicant)

Signature

February 22, 2005  
Date of Signature

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**FACSIMILE COVER SHEET**

**TO:** Examiner J. Alexander  
Group Art Unit 2666

**FROM:** Michael K. O'Neill

**RE:** U.S. Application No. 09/853,608  
Atty. Docket No. 03630.000317

**FAX NO.:** (703) 872-9306

**DATE:** February 22, 2005

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(Name of Attorney for Applicant)

*Michael K. O'Neill*  
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In re Application of:

DON F. PURPURA

Application No.: 09/853,608

Filed: May 14, 2001

For: INTERFACE DEVICE WITH NETWORK  
ISOLATIONTHE COMMISSIONER FOR PATENTS  
P.O. Box 1450  
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Docket No. 03630.000317

Examiner: J. Alexander

Group Art Unit: 2666

Date: February 22, 2005

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Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 20	MINUS	** 20	= 0	x \$25 \$50	- 0 -
INDEP. CLAIMS	* 4	MINUS	*** 4	= 0	x \$100 \$200	- 0 -
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						- 0 -

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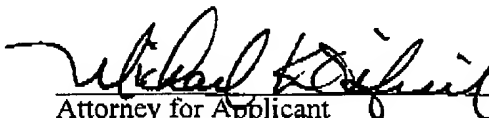
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(Name of Attorney for Applicant)

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February 22, 2005  
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- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$\_\_\_\_\_ is enclosed.
- ☐ Charge \$\_\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the fee for a \_\_\_\_\_ month extension is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
Attorney for Applicant  
Michael K. O'Neill  
Registration No.: 32,622

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